Approved for use through 10/31/2002. OMB 0651-0032 U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE PATENT APPLICATION FEE DETERMINATION RECORD PART I SMALL ENTITY OR RATE FEE **BASIC FEE** \$760.00 _{\$} 760 OR (37 CFR 1.16(a)) TOTAL CLAIMS 15 minus 20 = 0 OR 0 (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = 2 OR 0 (37 CFR 1.16(b)) = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 760 * If the difference in column 1 is less then zero, enter "0" in column 2 **TOTAL** OR **TOTAL** CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR (Column 1) (Column 2) SMALL ENTITY (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL TIONAL **AMENDMENT RATE AFTER PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT ,150° PAID FOR Total OR \$_18 Minus = 39 19 20 (37 CFR 1.16(c)) 342 OR Independent Minus 80 4 3 (37 CFR 1.16(b)) 80 1 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL 422 OR (Column 1) ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL TIONAL RATE **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE **FEE** AMENDMENT PAID FOR OR Total Minus 27 -12 (37 CFR 1.16(c)) 39 k \$_ \$ OR Independent *** 5 Minus 84 4 84 (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR 84 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL **AMENDMENT RATE** TIONAL **AFTER PREVIOUSLY EXTRA FEE** FEE **AMENDMENT** PAID FOR Total OR Minus (37 CFR 1.16(c)) OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

TOTAL

ADDIT, FEE

OR

TOTAL

ADDIT. FEE

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.